

SERIAL NUMBER 09/394,521	FILING DATE 09/10/99	CLASS 358	GROUP ART UNIT 2722	ATTORNEY DOCKET NO. 35.G0708c/b2
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APPLICANT

NAOYUKI MATSUMOTO, YOKOHAMA-SHI, JAPAN.

****CONTINUING DOMESTIC DATA*******

VERIFIED THIS APPLN IS A DIV OF 08/867,940 06/03/97
JP WHICH IS A DIV OF 08/337,234 11/04/94 PAT 5,684,607
 WHICH IS A CON OF 07/889,199 05/28/92 ABN

****371 (NAT'L STAGE) DATA*******

VERIFIED NONE
JP

****FOREIGN APPLICATIONS*******

VERIFIED JAPAN 134076/1991 06/05/91
JP

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 10/05/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no Verified and Acknowledged <u>JP</u> Examiner's Initials _____	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY JPX	SHEETS DRAWING 29	TOTAL CLAIMS 7	INDEPENDENT CLAIMS 2
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ADDRESS	SEE CUSTOMER NUMBER: 005514
	FACSIMILE APPARATUS
TITLE	

FILING FEE RECEIVED \$760	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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WASHINGTON, D.C. 20231
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Bib Data Sheet

CONFIRMATION NO. 4346

SERIAL NUMBER 09/394,521	FILING DATE 09/10/1999 RULE	CLASS 358	GROUP ART UNIT 2622	ATTORNEY DOCKET NO. 35.G0708C/D2
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APPLICANTS

NAOYUKI MATSUMOTO, YOKOHAMA-SHI, JAPAN;

** CONTINUING DATA *****

This application is a DIV of 08/867,940 06/03/1997 PAT 6,064,491
which is a DIV of 08/337,234 11/04/1994 PAT 5,684,607
which is a CON of 07/889,199 05/28/1992 ABN JP

** FOREIGN APPLICATIONS *****

JAPAN 134076/1991 06/05/1991 JP

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
** 10/05/1999

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature Initials	STATE OR COUNTRY JAPAN	SHEETS DRAWING 29	TOTAL CLAIMS 7	INDEPENDENT CLAIMS 2
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ADDRESS
5514
FITZPATRICK CELLA HARPER & SCINTO
30 ROCKEFELLER PLAZA
NEW YORK, NY
10112

TITLE
FACSIMILE APPARATUS

FILING FEE RECEIVED - 760	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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